ım	nage# 20150/15900	U126324					
SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS				Use separate so for each categor Detailed Summa	ry of the	FOR LINE NUMBER: (check only one) PAGE 25 OF 40 X 17 18 19a 19b 20a 20b 20c 21	
						person for the purpose of soliciting contributions the to solicit contributions from such committee.	
\rangle	NAME OF COMMI	TTEE (In Full)	dia M. Velazqı	•			
_	Full Name (Last, First, Middle Initial) Fraioli & Associates					Date of Disbursement	
٦.	Mailing Address PO Box 75214					05 29 2015	
	City Washington		State DC	Zip Code 20013-0214		Amount of Each Disbursement this Period	
	Purpose of Disburs Fundraising consu		200.00 02.1.	Category/	3250.00 Transaction ID: VN7AA9Z6SA7		
	Office Sought:	House Senate President District:	Disbursement For Primary Other (s	General	Type		
3.	Full Name (Last, First, Middle Initial) GEICO Mailing Address 1 Geico Plz					Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City Bethesda		State MD	Zip Code 20810-0002		Amount of Each Disbursement this Period	
	Purpose of Disbursement Leased car insurance					366.15	
	Candidate Name				Category/ Type	Transaction ID: VN7AA9Z3ZY4	
	Office Sought: State:	House Senate President District:	Disbursement For Primary Other (s	General			
Э.	Full Name (Last, First, Middle Initial) GEICO					Date of Disbursement	
	Mailing Address 1 Geico Plz					05 / D D / Y Y Y Y Y Y Z Z Z Z Z Z Z Z Z Z Z Z Z	
	City State Zip Code Bethesda MD 20810-0002					Amount of Each Disbursement this Period	
	Purpose of Disbursement Leased car insurance					366.15	
	Candidate Name Category, Type				Category/ Type	Transaction ID: VN7AA9Z7B04	
	Office Sought:	House Senate	Disbursement For Primary	2016 General	1 22		

Other (specify)

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

President

District:

State:

3982.30